supplemental priority data sheet

PTO/SB/02B attached hereto.

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☑ Declaration Submitted with Initial Filing

☐ Declaration OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Numb	nber 4940/1L				
First Named Inventor	Vivian Pecus et al.				
COMPLET	TE IF KNOWN				
Application Number	/ To be assigned				
Filing Date	Concurrently Herewith				
Group Art Unit	To be assigned				
Examiner Name	To be assigned				

As a below named inventor, I hereby declare that:									
My residence, post office a	address, and citizenship are a	as stated below next to m	y name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
END TO END SIMULATION OF A CONTENT DELIVERY SYSTEM									
the specification of which (Title of the Invention) Is attached hereto									
OR				DOT I do not formal					
was filed on (MM/D	D/YYYY)	as Unit	ed States Applicat	ion Number or PCT International					
Application Number	and w	as amended on (MM/DD/	YYYY)	(if applicable).					
I hereby state that I have re	eviewed and understand the	contents of the above ide	ntified specification	n, including the claims, as					
amended by any amendme	ent specifically referred to abo	ove.							
I acknowledge the duty to o	disclose information which is	material to patentability a	s defined in 37 CF	R 1.56.					
certificate, or 365(a) of any	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO					
Number(s)		,							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit	under 35 U.S.C. 119(e) of ar	ny United States provision	al application(s) li	sted below.					
Application Number		e (MM/DD/YYYY)							
50/275,779		n 13, 2001	Additional provisional application						
60/275,780	Marci	h 13, 2001	numbers are listed on a						

March 13, 2001

March 13, 2001

March 13, 2001

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (12-97)

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Litility or Design Patent Application DECLADATION

DEC	LAI	VATION -	Othic	, 01		<u> </u>	<u>i atc</u>		<u> </u>	- Cartio	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.											
U.S	U.S. Parent Application or PCT Parent Number					rent Filir MM/DD/\				it Patent Ni if applicabl	
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.											
Additional	U.S. or PO	CT international applicat	ion numbers ar	e listed or	a supp	olemental p	oriority data	sheet PT	O/SB/0:	2B attached he	ereto.
As a named inve	entor. I he	reby appoint the followin nected therewith:	ng registered p	ractitioneri iber	(s) to pr	osecute th	is applicatio	n and to	transac	t all business in Place Custor Number Bar (Label here	the Patent mer Code
			Regis	tration			Nam				tration nber
S Pa	eth H. mela C	DeRosa Ostrow 3. Maher	26 37 40	26,543 Leslie Ro 37,410 Ralph F. 40,712 Matthew J.				estaine Hoppi Marqu	n ardt	38, 38, 40,	893 494 997 941
		ewenstein		5,591			Katrine A				
Additional r	egistered	practitioner(s) named o	n supplementa	l Registere	ed Prac	titioner Info	ormation she	et PTO/	SB/02C	attached here	to.
Direct all corre	esponde		ner Number Code Label				OR	X Co	rrespo	ndence addr	ess below
Name				F	rede	rick Yu					
Address		E	Brown Ray	sman M	lillste	in Felde	er & Stei	ner LL	P		
Address				900	Third	Avenu	ie				
City		New Y	/ork			tate	NY	ZIP			
Country		USA	Telepho	ne	(212) 895-20	000	Fax (212) 895-2900			2900
believed to be punishable by	true; and fine or in	I statements made here I further that these stat nprisonment, or both, u t issued thereon.									
Name of Se	ole or F	First Inventor:				A petition	n has been	filed fo	r this u	nsigned inve	ntor
G	iven Nar	ne (first and middle [i	if anyl)				Famil	y Name	or Su	mame	
		Vivian						PEC	cus		
Inventor's Signature										Date	
Residence:	City	Falls Churc	h State	VA	_	Country	l	JSA		Citizenship	USA
Post Office A	ddress			37	'31 B	Madisc	n Lane				
Post Office A	Address										
City		Falls Church State			IP	220			ntry	US	
X Additiona	l invento	ors are being named	on the 2_s	uppleme	ntal Ac	ditional l	nventor(s)	sheet(s) PTO/	SB/02A attac	ched heret

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valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1 of _2

							_			
Name of Addition	:	A petition has been filed for this unsigned inventor							ntor	
Given Nan	ne (first and middle [if any])					Family Na	me or	Surname		
	Christopher					ВЕ	NDE	N		
Inventor's Signature					Date					
Residence: City	Woodford	State	State VA Country USA					Citizensh	ip	USA
Post Office Address			8468 Guinea Station Road							
Post Office Address										
City	Woodford	State	V	4	ZIP	22580	Coun	try	US	A
Name of Addition	nal Joint Inventor, if any: A petition has been filed for this unsigned inventor									entor
Given Na	me (first and middle [if any])	and middle [if any]) Family Name or Surname								
	David L.	L. BULLOCK								
Inventor's Signature			D					Dat	e	
Residence: City	Conyers	State	G/	A .	Country	USA		Citizer	ship	USA
Post Office Address			28	75 Bc	onds La	ake Road				
Post Office Address										
City	Conyers	State		3A	ZiP	30012	Co	untry	U	SA
Name of Additio	nal Joint Inventor, if an	y:	·		A petition	on has been fi	led for	this unsigr	ed inv	entor
Given Na	ame (first and middle [if any])				Family N	ame o	r Surname		
	Philip					L	AUSI	ER		
inventor's Signature								Da	te	
Residence: City	Canton	State	(3A	Country	us	A	Citize	nship	USA
Post Office Address	1005 Iron Mountain Road									
Post Office Address	5						· · · ·			
City	Canton	State	(GA	ZiP	3011	30115			USA

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

		_								
Name of Addition	Iditional Joint Inventor, if any: A petition has been filed for this unsigned inventor									
Given Nar	ne (first and middle [if any])					Family Nar	ne or S	Surname		
	Mark KALMBACI							CH		
Inventor's Signature								Date		
Residence: City	Round Rock	State	State TX Cou			USA		Citizensh	ip	USA
Post Office Address	2928 Cedar Crest Circle									
Post Office Address										
City	Round Rock	State	TX		ZIP	78664	Countr	у	US	Α
Name of Addition	nal Joint Inventor, if any	/:			petition	has been file	ed for th	nis unsigne	ed inve	entor
Given Na	ame (first and middle [if any]) Family Name or Surname									
	Aaron D. Falk									
Inventor's Signature			D						e	
Residence: City	Norwalk	State	СТ	.	ountry	USA		Citizen	ship	USA
Post Office Address			4	465 FI	ax Hill	Road				
Post Office Address										
City	Norwalk	State	С	T	ZIP	06854	Cou	ntry	U	SA
Name of Additio	nal Joint Inventor, if an	y:	•		A petitio	n has been fil	ed for t	his unsign	ed inv	entor
Given Na	ame (first and middle [if any])				Family Na	ame or	Surname		
Inventor's Signature	Date									
Residence: City		State Country Citizenship								
Post Office Address										<u> </u>
Post Office Address					T		- 1			
City		State			ZiP			Country		

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DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
Silvana Merlino Frederick Yu Brooke W. Quist James W. Woods Mauri Aven Franklin Abrams	Registration Number 44,237 45,251 45,030 47,184 42,275 43,457	Name	Registration Number

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applic	ations:								
Prior Foreign Application Number(s)	Coun	ntry	Forei (N	gn Filing Date IM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	Attached? NO		
					000000000000000		00000000000000		
Additional provisional applications: Application Number Filing Date (MM/DD/YYYY)									
		Filing Date (MM/DD/YYYY) March 13, 2001							
60/275,795 60/275,804 60/275,813 60/275,815 60/275,816 60/275,817				March 13, 2001 March 13, 2001 March 13, 2001 March 13, 2001 March 13, 2001					
Additional U.S. applicat									
U.S. Parent Applica Number		PCT Parer Number		Parent Filing Date Parent Patent N (MM/DD/YYYY) (if applicab					

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valid OMB control number.

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applications:									
Prior Foreign Application Number(s)	Country		eign Filing Date MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
				0000000000000000					
Additional provisional applications:									
	cation Number		Filing Date (MM/DD/YYYY) March 13, 2001						
60/275,825 60/275,826 60/275,827 60/275,838			March 13, 2001 March 13, 2001 March 13, 2001						
Additional U.S. application	ons:								
U.S. Parent Applicat Number	tion PCT Par Numbe		Parent F (MM/DI	Parent Patent Number (if applicable)					

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

